	more than 30 days	Termination Date:	Term	A manadamant	A STATE OF THE STA	Report
	A \$200 penalty shall be assessed against anyone who files	Employing Office:	Officer Or Employee	State: PA District: 15	✓ Member of House of R	Filer Status
Mo	2019 £US 10 PN 12: 50 (Office Use Only)	202-225-6411 (Daytime Telephone)))	Charles W. Dent (Full Name)	
	The designation of			,		
ÆD	DELIVERED	FORM A Page 1 of 9 For use by Members, officers, and employees		EPRESENTATIVE	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT	UNIT
	HAND					

Type (Annual (May 15) Amendment Termination PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

If yes, complete and attach Schedule I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$1,000) during the reporting period? If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$1,000) during the reporting period? If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$1,000) during the reporting period? If yes, complete and attach Schedule IV. Did you, your spouse, or dependent child have any reportable liability (more than \$1,000) during the reporting period? If yes, complete and attach Schedule IV. Did you, your spouse, or dependent child have any reportable liability (more than \$1,000) during the reporting period? If yes, complete and attach Schedule IV. Each question schedule attach Schedule V. Each question schedule attach Schedule V. Each question schedule attach Schedule And		_		_					_		_	4	
or more from any source in the reporting period? If yes, complete and attach Schedule I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$1000 at the end of the period? If yes, complete and attach Schedule III. Did you, your spouse, or a dependent child any reportable asset worth yes or dependent child exceive any report from one source? If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of more than \$10,000 at the end of the period? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of more stand \$10,000 at the end of the period? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you have any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you have any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you have any reportable positions on or before the date of very gent year? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a gent year? If yes, complete and attach Schedule VIII. Did you have any repor			X		·<		₹		.≡	_	.= 	_	_
and attach Schedule I. Toganization make a donation to charity in lieu of paying persod? Toganization make a donation to charity in lieu of paying yes very pearance, or article in the reporting period? Toganization make a donation to charity in lieu of paying yes very pearance, or article in the reporting period? Toganization make a donation to charity in lieu of paying yes voluments from one source)? Toganization make a donation to charity in lieu of paying yes voluments from one source)? Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization make a donation to charity in lieu of paying yes voluments. Toganization exceeding 11,000 during the reporting period? Toganization exceeding 11,000 during the reporting period? Toganization exceeding 11,000 during the reporting period? Toganization exceeding 11,000 during the reporting yes volument with a litach Schedule VII. Toganization exceeding 11,000 during the reporting yes volument must be answer with a litach Schedule VII. Toganization exceeding 11,000 during the reporting yes volument and attach Schedule VII. Toganization exceeding 11,000 during the reporting yes volument and attach Schedule VII. Toganization exceeding 11,000 during the reporting yes volument with a litach Schedule VIII. To	Exemptions	Trusts-	CLUSION O	If yes, complete a	Did you, your spous (more than \$10,000)	period? If yes, complete a	Did you, your spous reportable asset in a	more than \$1,000 at If yes, complete a	Did you, your spous more than \$200 in th	If yes, complete a	Did any individual o you for a speech, ap	If yes, complete a	Did you or your spo or more from any so
the reporting period (i.e., aggregating more than \$335 and not exempt)? If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any report reimbursements for travel in the reporting period (worth more from one source)? If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of VIII. current calendar year? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a entity? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a entity? Each question in this part must be answerd schedule IX. Each question in this part must be answerd schedule attached for each "Yes" response schedule attached for each "Yes" response schedule attached for each good of the each good of		Details regarding "Qualified Blind Trusts" approverusts" need not be disclosed. Have you excluded child?	F SPOUSE, DEPENDENT, OR TRU	and attach Schedule V.	any reportable liability	and attach Schedule IV.			I receive "unearned" income of noid any reportable asset worth	and attach Schedule II.	lieu of paying	and attach Schedule I.	g., salaries or fees) of \$200
No VI. the reporting period (i.e., aggregating more than \$335 and not exempt)? If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any report from one source)? If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of VIII. current calendar year? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a entity? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a entity? If yes, complete and attach Schedule IX. No VIII. Each question in this part must be answerd schedule attached for each "Yes" response schedule attached for each "Yes" response to the schedule attached for each gould the Committee on Standards of Official Conduct and certain other "excent the Committee on Standards of Such a trust benefiting you, your spouse, or dependent of answer "yes" unless you have first consulted with the Committee on	ets, "ı Do n	ed by d fron	STI		res		res		řes ,		Yes		Yes
exempt)? If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any report from one source)? If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of VIII. current calendar year? If yes, complete and attach Schedule VIII. Did you hold any reportable agreement or arrangement with a lix. Did you have any reportable agreement or arrangement with a lix. Each question in this part must be answerd schedule attached for each "Yes" response Schedule attached for each "Yes" response or dependent income, transactions, or liabilities of a spouse or dependent were "yes" unless you have first consulted with the Committee on	unear ot ans	the C	NT.		z		z	'	` Z		z		z
the reporting period (i.e., aggregating more than \$335 and not exempt)? If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any report vII. reimbursements for travel in the reporting period (worth more from one source)? If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of VIII. current calendar year? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a entity? If yes, complete and attach Schedule IX. Each question in this part must be answerd schedule attached for each "Yes" response schedule attached for each "Yes" response schedule attached for each schedule income, transactions, or liabilities of a spouse or dependent yes" unless you have first consulted with the Committee on	ned" swer	repo	瀀		o Ki		0		0	i	۰ ۲ .		Ŷ
the reporting period (i.e., aggregating more than \$335 and not exempt)? If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any report. In the reporting period (worth more from one source)? If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of II. current calendar year? If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with a entity? If yes, complete and attach Schedule IX. Each question in this part must be answerd schedule attached for each "Yes" response Schedule attached for each schedule IX. Each question in this part must be answerd schedule attached for each schedule IX. If yes, complete and attach Schedule IX. Each question in this part must be answerd schedule attached for each "Yes" response ION ANSWER EACH OF THESE QUILDON ANSWER EACH OF THE ANSWER EACH OF THE ANSWER EACH OF THE ANSWER EACH	incor 'yes''	ittee 1 det	A				⋝		≤		≤		<u> </u>
otherwise able travel or than \$335 filing in the ad and the ad and the a. ESTIONS epted ndent Y child	liabilities of a spouse or dependent child st consulted with the Committee on		ON ANSWER EACH OF THESE QUESTION	schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate	If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule VIII.	Did you hold any reportable positions on or before the date of filing in the II. current calendar year?	from one source)? If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule VI.	
Yes Yes Yes	Yes	Yes	 -		ne app		Yes		Yes				Yes
No v No No	N _O	N			ropri		<		< -		_		-
No vo	4	\	}		ate		6	:	6		6		8 ≤

m
×
$\underline{\mathbf{U}}$
I
Ш
\simeq
TE
≡
_
1
D
in
S
~
E
Ś
*
4
ND
O
=
ت
¥
4
Ш
\triangleright
70
Ť
m
111
NED'
=
=
Z,
C
$\overline{\mathbf{C}}$
\preceq
5
Ш

Name Charles W. Dent

Page 2 of 9

	Identify (a) ea a fair market and (b) any o than \$200 in land, provide mutual funds retirement pkin which you investments), in the accoun plans that are and its value that is not puts activities, information, so information of savings accools government. If you so chool that of your so in the optional firms are the parent or sible savings accools government.	ΙΓ	JT	DC-3	DC-3	DC-2	TL
BLOCK A	Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	AFLAC Inc. (Common)	Aflac, Inc (Common)	AllianceBernstein Growth & Income FD CL A	AllianceBernstein Large Cap Growth	AllianceBernstein Large Cap Growth	American Bank (Savings)
вгоск в	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	None	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1 - \$1,000	\$1,001 - \$15,000
вгоск с	Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAS, Indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	INTEREST
вгоск D	Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200
BLOCKE	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	S		i			

ひてコにしい	į
כרב = -	7
Ξ	
_	~つつ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
2	7
٦	_
	•
CZCAZZC	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Charles W. Dent		
JT	American Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	1
SP	American Euro Pacific Growth Fund CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Bank of America (Checking / Savings)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	!
JT	Bank of America (Common)	\$15,001 - \$50,000	DIVIDENDS	_	
	Commonwealth of PA Deferred Compensation Program (457 Plan Not Self Directed)	\$50,001 - \$100,000	N/A	NONE	
SP	Davis NY Venture FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-3	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Embassy Bank	\$1 - \$1,000	INTEREST	\$1 - \$200	i
DC-3	Embassy Bank	\$1 - \$1,000	INTEREST	\$1 - \$200	1
DC-1	Embassy Bank	\$1 - \$1,000	INTEREST	\$1 - \$200	ļ
DC-2	Flagstar Bank CD	None	INTEREST	\$201 - \$1,000	S
DC-1	Flagstar Bank CD	None	INTEREST	\$201 - \$1,000	S

ľΛ
~,
\sim
•
т
=
Ш
_
\subset
П
_
Ξ
_
•
-
~
Š
ഗ
-
O
_
Ш
\dashv
ഗ
0,
-
5
7
=
$\overline{}$
_
=
_
7
~
_
Ш
-
_
_
~
$\tilde{\rightarrow}$
_
m
111
$\mathbf{\mathcal{C}}$
=
-
_
7
_
$\overline{}$
೧
ਨ
<u></u>
ਨੂ
CON
COM

のつにロフニ	COHEDITE III ACCETC AND "INEADNED" INCOME				
	THE - ACCUMENT CHACKING INCOME	Name Charles W. Dent	W. Dent		Page 4 of 9
DC-3	Flagstar Bank CD	None	INTEREST	\$1 - \$200	S
l	Gabelli Equity Trust (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	:
	Gabelli Healthcare & Wellness SRX (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	Gabelli Utility Trust (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
DC-3	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	I-Shares Dow Jones Select Dividend Index Fund IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	I-shares Dow Jones Select Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ı
DC-1	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-2	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-3	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-1	Legg Mason Partners Equity Fund CL O	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Loomis Sayles Strategic Income Fund CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

Š
CHEDULE III -
OLE III
=
ASSETS AND
AND
قے
Ž
E
Z
INEARNED'
=
NCOME
9
111
Name (
Char

SCHEDUI	JT Nuveen Municipal Value Fund DC-2 Oppenheimer Quest Opportunity Value Fund CL C SP Oppenheimer Small & Medium Cap Value FD CL C (IRA) JT PA Tap Account (529 Plan - Prepaid Tuition) Pennsylvania State Employees	915,0	Name Charle 01 - 000 01 - 01 - 01 - 01 - 01 - 01 -	e Charles W.
SP	Oppenheimer Small & Medium Cap Value FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	
. <u>1</u>	PA Tap Account (529 Plan - Prepaid Tuition)	\$1,001 - \$15,000	N/A	
	Pennsylvania State Employees Retirement System (Pension - Not Self Directed)	\$100,001 - \$250,000	N/A	
JΤ	PIMCO FD PAC INVT MGMT All Asset FD CL C	\$1,001 - \$15,000	DIVIDENDS	
JT	Powershares Intl Divd Achievers Portfolio	\$1,001 - \$15,000	DIVIDENDS	
	TIAA-CREF Stock Fund 403(B) Plan	\$1,001 - \$15,000	N/A	
	TIAA-CREF Traditional Long- Term Bond Fund 403(B) Plan	\$1,001 - \$15,000	N/A	
JT	Treasury Fund Daily Money Class	\$1,001 - \$15,000	DIVIDENDS	!
I	Van Kampen Government SEC FD CL A (Beneficial IRA)	\$1,001 - \$15,000	DIVIDENDS	
DC-2	Van Kampen Harbor Fund CL A	\$1,001 - \$15,000	DIVIDENDS	, s
JT	Wachovia Securities Bank Deposit Sweep Option	\$1,001 - \$15,000	INTEREST	
DC-2	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME DC-3 Wachovia Securities Bank \$1,001 - INTEREST \$15,000 DC-1 Wachovia Securities Bank \$15,001 - INTEREST \$50,000	Name Charles W. Dent \$1,001 - INTEREST \$15,000 \$15,001 - INTEREST \$50,000
- INTER)00 INTER	- INTEREST 00 INTEREST INTEREST
OO INTER	- INTEREST 00 INTEREST
· '' '' '' '' '' '' '' '' '' '' '' '' ''	EREST EREST EREST
	\$1 - \$200 \$1 - \$200 \$1 - \$200

,

i

:

į

.

ì

SCHEDULE IV - TRANSACTIONS

Name Charles W. Dent

Page 7 of 9

transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

SP,			Capital Gain in		
JT	Asset	Transaction	Excess of \$200?	Date	Amount of Transaction
Ίľ	400 AFLAC	S	No	03-13-09	\$1,001 - \$15,000
DC-3	DC-3 Flagstar Bank CD		No	07-24-07	\$1,001 - \$15,000
DC-2	Flagstar Bank CD	.	Z 0	07-24-2009	\$1,001 - \$15,000
DC-1	Flagstar Bank CD	S	No	01-24-09	\$1,001 - \$15,000
			(

SCHEDULE VIII - POSITIONS

Name Charles W. Dent

Page 8 of 9

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Name of Organization
Crime Victims Council of the Lehigh Valley, Inc.
Advisory Board of the Minsi Trails Council; Boy Scouts of America
Minsi Trails Council; Boy Scouts of America; Lehigh Valley Leadership Dinner
Lehigh Valley Advisory Council for the Girl Scouts of Eastern Pennsylvania

SCHEDULE IX - AGREEMENTS

Name Charles W. Dent

Page 9 of 9

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

	2009		Date	
Charles W Dent & Commonwealth of PA		Parties To		
Health Insurance Provided by Highmark Blue Shield	Terms of Agreement			